

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

09/000330

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	4 minus 20 =	* -
INDEPENDENT CLAIMS	1 minus 3 =	* -
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE

OR

OTHER THAN  
SMALL ENTITY

RATE	FEES
	395.00
x\$11=	
x41=	
+135=	
TOTAL	

RATE	FEES
	790.00
x\$22=	
x82=	
+270=	
TOTAL	930

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* 16	Minus	** 38 =
Independent	* 2	Minus	*** 3 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL	ADDITIONAL FEE

RATE	ADDI- TIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL	ADDITIONAL FEE

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* Minus	** =	
Independent	* Minus	*** =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL	ADDITIONAL FEE

RATE	ADDI- TIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL	ADDITIONAL FEE

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	* Minus	** =	
Independent	* Minus	*** =		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL	ADDITIONAL FEE

RATE	ADDI- TIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL	ADDITIONAL FEE

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective November 10, 1998

Application or Docket Number

*09/000,330*

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

FOR

NUMBER FILED

NUMBER EXTRA

BASIC FEE

TOTAL CLAIMS

*4*

minus 20 =

\* —

INDEPENDENT CLAIMS

*1*

minus 3 =

\* —

MULTIPLE DEPENDENT CLAIM PRESENT

SMALL ENTITY  
TYPE

OR OTHER THAN  
SMALL ENTITY

RATE

380.00

RATE

760.00

X\$ 9 =

X39 =

+130 =

TOTAL

X\$18 =

X78 =

+260 =

TOTAL

760.00 *pd*

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

**AMENDMENT A**

CLAIMS  
REMAINING  
AFTER  
AMENDMENT

HIGHEST  
NUMBER  
PREVIOUSLY  
PAID FOR

PRESENT  
EXTRA

Total

\* *5*

Minus

\*\* *20*

= —

X\$ 9 =

X39 =

+130 =

TOTAL

X\$18 =

X78 =

+260 =

TOTAL

ADDITIONAL FEE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

09/000,330

CPA filed

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEES	RATE	FEES
BASIC FEE (37 CFR 1.16(a))				\$ _____		\$ _____
TOTAL CLAIMS (37 CFR 1.16(c))	20	minus 20 = * *	x \$ _____ =		x \$ _____ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3	minus 3 = * *	x _____ =		x _____ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		yes	+ _____ =		+ _____ =	
			TOTAL		OR TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR OTHER THAN  
SMALL ENTITY

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
				x \$ _____ =		x \$ _____ =	
Total (37 CFR 1.16(c))	* 23	Minus	** 20 = 3	x \$ _____ =		x \$ _____ = 54	
Independent (37 CFR 1.16(b))	* 3	Minus	*** - =	x _____ =		x _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							
				+ _____ =		+ _____ = 270.00	
				TOTAL		OR TOTAL	
				ADDITIONAL FEE		ADDITIONAL FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
				x \$ _____ =		x \$ _____ =	
Total (37 CFR 1.16(c))	* 20	Minus	** 23 = -	x \$ _____ =		x \$ _____ =	
Independent (37 CFR 1.16(b))	* 3	Minus	*** - = -	x _____ =		x _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							
				+ _____ =		+ _____ =	
				TOTAL		OR TOTAL	
				ADDITIONAL FEE		ADDITIONAL FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
				x \$ _____ =		x \$ _____ =	
Total (37 CFR 1.16(c))	* 20	Minus	** 26 = -	x \$ _____ =		x \$ _____ =	
Independent (37 CFR 1.16(b))	* 0	Minus	*** - = -	x _____ =		x _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							
				+ _____ =		+ _____ =	
				TOTAL		OR TOTAL	
				ADDITIONAL FEE		ADDITIONAL FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

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TO - OFFICE OF FINANCE  
CRYSTAL PLAZA 2. LOBBY

09/000330  
SERIAL NUMBER

FROM: PCT INTERNATIONAL DIVISION-DO/EO

PLEASE PROCESS THE FOLLOWING COLLECTIONS:

FEES CODE	AMOUNT	FEES CODE	AMOUNT
<b>BASIC FEE</b>		<b>CLAIMS/MULTIPLE DEPENDENT</b>	
960	_____	964	_____
961	_____	965	_____
970	930	966	_____
971	_____	967	_____
958	_____	968	_____
959	_____	969	_____
956	_____	<b>LATE FEE/SURCHARGE</b>	
957	_____	154	_____
962	_____	254	_____
963	_____	156	_____
<b>OTHER:</b>	_____	581	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

THE ORIGINAL METHOD OF PAYMENT

BY A CHECK 930.00

BY A CHARGE TO DEPOSIT ACCOUNT NO \_\_\_\_\_

DO/EO FEE

M9